



Little Rock Christian Academy Discovery/Academic Support Referral Form:

Name:

Date:

I would like to recommend _____ for LRCA Discovery services.

I am: classroom teacher

family-student

The goals for this learner are:

My recommendation is based on (please check and give explanation for each appropriate source):

_____ academic and development history

_____ assessment results

_____ interviews with family-student

_____ recommendation by learning professional

Any additional comments that would be beneficial in admission process (for example previous services/responses):

Please attach any assessments or work samples to aid in response planning:

Signature: